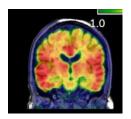
Future Directions in Disclosure Practices

Lindsay Clark, PhD
Assistant Professor / Clinical neuropsychologist
Wisconsin ADRC Clinical Core Co-Leader
Wisconsin ADRC

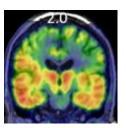


ADRC PET disclosure practices



Amyloid PET

- 19 sites (53%) currently disclose results
 - 11 routinely
 - 8 sometimes
- 17 sites (47%) do not disclose results
 - Not part of original study design
 - Potential harms to participants
 - Time/burden on staff or personnel shortage
 - Results not clinically actionable or do not meet clinical regulations



Tau PET

- 6 sites (17%) currently disclose results
 - 4 sometimes
 - 2 rarely
- Additional reasons for not disclosing results
 - Fewer sites collecting these data
 - Concerns about validity of cutoffs and meaning of results





Protocol Development

Process for learning results

Risks/benefits for learning results

Research Participant Information and Consent Form Addendum

itudy Title: Amyloid and Tau Imaging in Alzheimer's Disease

Farticinant Consent Addendum

Participant name

ADRC# or WRAP# (circle one)

You are currently enrolled in the research study. Amyloid and Tau Imaging in Alzheimer's Dieseae*. The purpose of this research tudy is collect image of any amyloid spiral and an autoritiditiest tangles that may be present in your brain. Amyloid and star pathology are related profited in the brain change were free than the profit of the desired profit in the brain change were the sea from the "type side for memory and imaging pendics, health, and lifetily. The ability to image these processes in individuals may allow researches to be other understand very some people deviled put.

The information in this consent form addendum will help you decide whether or not you could like to participate in a substudy that would allow you to receive the results of you myloid PET scan. This form should only be completed after reviewing and signing the consent forms.



PHQ-4 Suicidality screen

In person Televideo (HIPAAcompliant platform) What You Need to Know about Amyloid PET Results

A guide for research participants



This result means that your mild cognitive impairment may be at least partially aussed by Alzheimer's disease.

You'result means you are at an Increased risk of developing dementia due to

Alzheimer's disease. It is not possible to provide specific interact amount of risk based on this result.

This result cannot determine if you have other changes occurring in your brain such as vascular disease, Parkinson's disease, or Lewy body disease.

The scan did not detect amyood plaques in your brain. This result means Archimeries related brain shanges were not detected at this time. It is possible that amyoid plaques are present but not at an elevated level. It is possible that amyoid plaques are present but not at an elevated level. You are not all an indexed level at the time to developing elemental due to This result only all the present of the pre

vel was measured by a PET Soan on (OATE)

PHQ-4

Suicidality screen

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ONLE Elevated

Suicidality screen

Impact of test result questionnaire

Dementia riskreduction visit

Community supports visit

Satisfaction survey

Informed consent addendum

PET Scan

Mental health screening / scheduling

Education /
Disclosure visit
(approx. 3-6
months after scan)

Post-disclosure wellness check (1-3 weeks)

Post-disclosure additional visit (optional)

Post-disclosure satisfaction survey (optional)

Protocol Adaptions

Process for learning results

Risks/benefits for learning results

Research Participant Information and Consent Form Addendum
University of Wisconsin-Madison

Amyloid and Tau Imaging in Alzheimer's Disease

Participant Consent Addendum

Participant name

ADRC# or WRAP# (circle one)

You are currently enrolled in the research study. Amyould and Tax imaging in Alzheiser ar Desearch The propose of this research study is on lock images of any amyoid places insurance of the second study of the second study is on the contract of the second study insurance of the second study is one of the second study in the second study is of the insurance of the second study is one of the second study is one of the second study is of the second study is one of the second study in the second study is one of the second study is o

The information in this consent form addendum will help you discide whether or not you would like to participate in a substauty that would allow you to receive the results of your any/fold PET scan. This form should only be completed after reviewing and signing the make should be compared form.

Informed consent addendum

Best practices for providing brief, yet effective pre-testing and disclosure education?



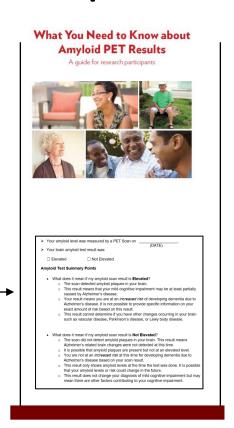
Education / Disclosure visit



Protocol Adaptions

Best practices for communication of result?

- Verbal + written report
- Contextualizing with clinical stage / known risk factors
- Visual image?
- Ensuring understanding / teach-back as needed
- Q&A



Education (Coordinator)
/ Disclosure (Clinician)



Protocol Adaptions

How much post-disclosure support is needed? How can we create pathways and resources for participants?

- Clinical follow-up emphasizing limitations of research results and considerations for sharing with medical providers
- Mental Health Services
- Health Behavior/Lifestyle Recommendations
- Advanced Planning Services
- Caregiver Support
- Educational Resources





PHQ-4 Suicidality screen

Impact of test result questionnaire

Dementia riskreduction visit

Community supports visit

Satisfaction survey

Post-disclosure wellness check (1-3 weeks)

Post-disclosure additional visit (optional)

Post-disclosure satisfaction survey (optional)

Clinician / Staff Training

Recommendations from our study clinicians:

- Training on AD, biomarker testing and interpretation
- Hands-on learning and collaboration
- Patient-facing materials to facilitate communication
- Appropriate amount of time for visit

Erickson, et al., 2024. J Prev Alzheimers Dis.

Coordinator training and effort:

- Informed consent
- Mental health screening
- Pre-disclosure education
- Disclosure visit scheduling
- Post-disclosure wellness check or additional screening /questionnaires



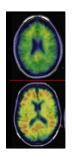


Biomarker result interpretation

Current practice

Binary amyloid PET Result

- Elevated (Positive)
- Not Elevated (Negative)
- Based on visual read or SUVR cutoff



Future developments

More detailed quantitative information

- Centiloid value?
- High/Intermediate/Low?
- Estimated duration (e.g., chronicity)?

Challenge: What exactly do these mean for prognosis or treatment? Need more information about how these values translate to specific prognostic or treatment recommendations.

More biomarker tests

- Validation of clinically meaningful cutoffs for tau tracers and bloodbased biomarker tests
- Communication of multiple biomarker results
- Lack biomarker tests for non-AD diseases (e.g., Lewy Body, TDP-43)
- Need more specific risk estimates



External validity – Cultural Considerations

Relationship between social determinants of health, health factors, and biomarker test results

- Higher rates of clinical AD but lower rates of amyloid positivity in non-White participants (Wilkins et al., 2022 JAMA Neurology)
- Ethnoracial differences in plasma biomarkers associated with greater medical comorbidities (Meeker et al., 2023 A&D)

Cultural factors related to communication of results and recommendations

- There is a need for both protocolized disclosure AND site-specific cultural adaptation
- Solicit iterative feedback from community partners and advisors, as well as past participants, loved ones, and clinicians



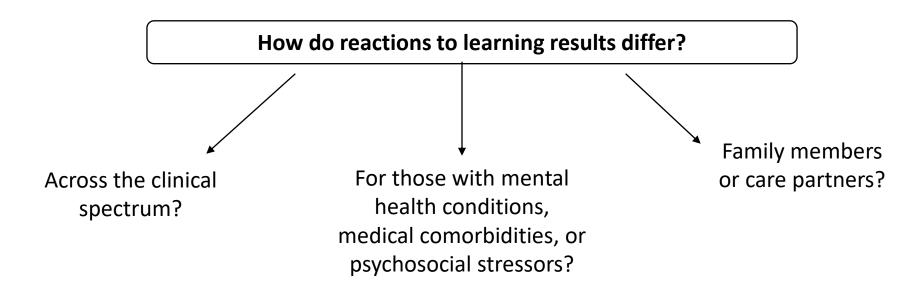
Lack of representation in biomarker validation studies

Non-white populations disproportionately screened out of trials

Treatments less generalizable



External validity – Heterogeneous samples



Does learning results impact:

- Stigma
- Coping self-efficacy
- Cognitive symptoms/performance
- Future time perspective
- Perceived risk for dementia

- Understanding of diagnosis or prognosis
- Seeking evaluation or treatment
- Health behavior change
- Advanced planning



Available Resources

THE NIA ALZHEIMER'S DISEASE RESEARCH CENTERS PROGRAM

National Alzheimer's Coordinating Center

https://naccdata.org/adrc-resources/best-practices

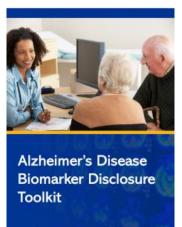
Biomarker Disclosure Guidance Document

Testing for Alzheimer Disease Biomarkers and Disclosing Results Across the Disease Continuum

Emily A. Largent, JD, PhD, RN, Joshua D. Grill, PhD, Kyra O'Brien, MD, David Wolk, MD, Kristin Harkins, MPH, and Iason Karlawish. MD

Correspondence Dr. Largent

Largent et al., Neurology 2023 article



Pittsburgh ADRC Toolkit

https://www.adrc.pitt.edu/forresearchers/biomarkerdisclosure-toolkit/



Webinars
Decision tools
Working groups



CLARiTI biomarker disclosure toolkit

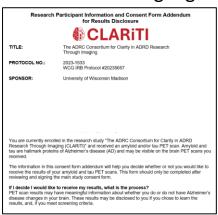


53% of sites already disclose amyloid PET results (some routinely, some occasionally)

• If sites already have disclosure processes in place, can continue to use those processes for CLARiTI participants

For sites who do not currently return biomarker results, or want to supplement current processes:

Consent form language



Educational materials

What You Need to Know about



Participant result summary report

	-	as measured by a PET Scan o	on
> Your br	ain amyloid te	est result was:	
□ Elev	ated	□ Not Elevated	
Amyloid T	est Summary	/ Points	
	The scan d This result caused by Your result Alzheimer's exact amou	Alzheimer's disease. means you are at an <i>increase</i> s disease. It is not possible to punt of risk based on this result.	ur brain. Impairment may be at least partially ad risk of developing dementia due to provide specific information on your other changes occurring in your brain
	The scan d Alzheimer's It is possibl You are no Alzheimer's	s related brain changes were n le that amyloid plaques are pre it at an <i>increased risk</i> at this tin s disease based on your scan	in your brain. This result means not detected at this time. esent but not at an elevated level. me for developing dementia due to result.
	This result	only shows amyloid levels at the	he time the test was done. It is possible

that your amyloid levels or risk could change in the future.

 This result does not change your diagnosis of mild cognitive impairment but may mean there are other factors contributing to your cognitive impairment.

Staff training manual



Forms/Scripts

- ✓ Assessing readiness
- ✓ Conducting disclosure visits
- ✓ Resources for next steps

CLARiTI disclosure toolkit development

Develop and test with pilot sites Collaborate with Inclusion Core for participant input Finalize toolkit and disseminate through NACC Add tau PET disclosure materials once available Update toolkit materials based on preliminary feedback



Acknowledgements

Wisconsin ADRC and WRAP participants who volunteer their time to help us learn more about AD!





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WRAP: NIA R01 AG027161 (Sterling Johnson) WADRC: NIA P30AG062715 (Sanjay Asthana)

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